

TERMINAL NUMBER	DRAWINGS			CLAIMS ALLOWED	
	Sheets Drwg.	Figs. Drwg.	Print Fig.	Total Claims	Print Claim for O.D.
The term of this patent shall be disclaimed.	(Assistant Examiner)			NOTICE OF ALLOWANCE MAILED	
to _____ (date)				(Date)	
The term of this patent shall not be beyond the expiration date of Patent No. _____	(Primary Examiner)			ISSUE FEE	
_____				(Date)	Amount Due
The terminal _____ months of patent have been disclaimed.	(Legal Instruments Examiner)			ISSUE BATCH NUMBER	
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